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<u>Approved For Release 20</u>06/11/13፣።**Θሸፋ፣ ሞ**ወጮ፣5-00399R000100110091-5 CONTROL NO. REPORTS INVENTORY DDS/OF-157 PREPARE IN DUPLICATE 1. TITLE OF REPORT (if a fill-in report include Form No.) 2. TYPE STATISTICAL 0F NARRATIVE Advance Agreements - IRD, B&P, TE REPORT MACHINE-NAME LISTING PERSONNEL TRAINING ADMIN. GENERAL LOGISTICS 3. FUNCTIONAL AREA SECURITY OTHER (specify) MEDICAL X FINANCE 4. NO. OF COPIES PREPARED 5. FREQUENCY (weekly, monthly, quarterly, etc.) 6. DISTRIBUTION (No. of components not number of copies) 1 100 +7. FORMAT (memorandum, form 8. ADP PROCESSING 9. DIRECTIVE AUTHORITY REQUIRING REPORT computer print-out, etc) YES IF YES GIVE ADP PROCESSING NO. Memorandum NO / Our Audit Needs 10. PREPARING COMPONENT (include lowest level II. FEEDER REPORTS (State total number and identify by Title, contributing information to report) Form No., or nomenclature. Attach separate sheet if necessary.) Office of Naval Material 12. COST FACTORS MANUAL PREPARATION AND REVIEW COSTS HOURLY HOURS PER COST PER TIMES GRADE X X COST PER YEAR RATE REPORT REPORT PREPARED No cost to Agency. COSTS OF COMPUTER PRODUCED REPORTS TOTAL COSTS PER YEAR No Cost 13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Needed for review of overhead rates to recommend to contracting officer -including IRD, etc. 14. FUTURE GOALS GOAL PROPOSED BY COMPONENT FOR THIS REPORT ESTIMATED SAVINGS RETAIN AS IS OTHER (explain) MAN-HOURS **DOLLARS** CHANGE DISCONT INUE 16. DATE OF INVENTORY 17. NAME AND TITLE OF PERSON FURNISHING INFORMATION 18. EXTENSION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110091-5 FORM Collegification 142